

**BEHAVIORAL HEALTH & HOMELESSNESS
STATEWIDE UNIFIED RESPONSE GROUP
(BHHSURG)**

COVID-19 UPDATE

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Presenters

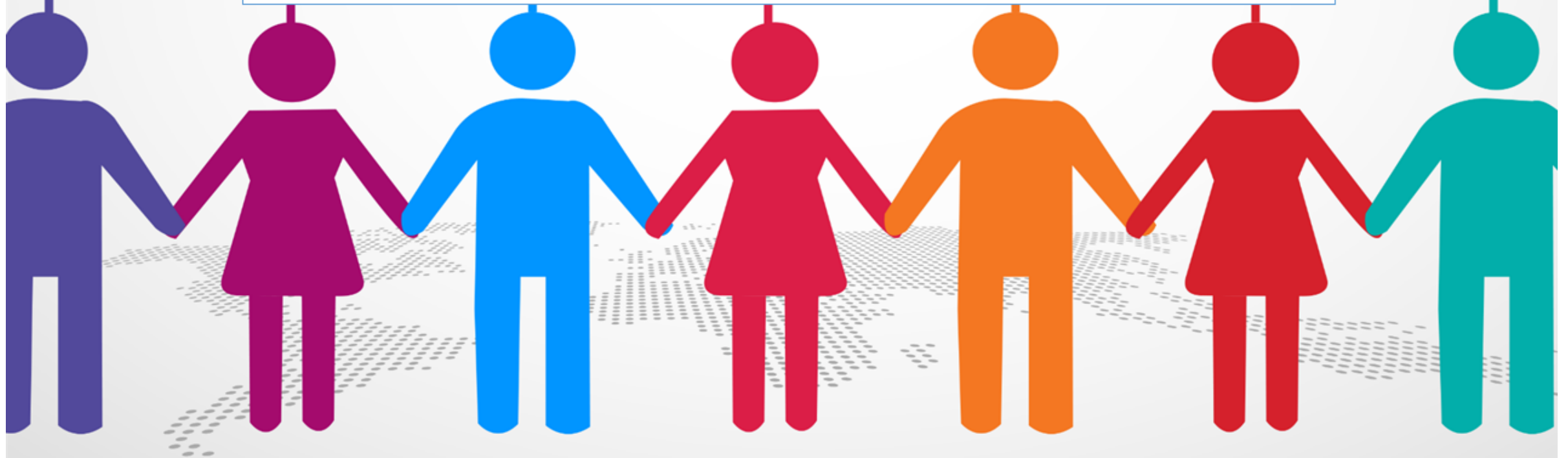
- **Matthew Milette-Winfree, PhD, Clinical Psychologist**
University of Hawai'i Center for Cognitive Behavioral Therapy
Considerations for Promoting Client Engagement and Telepresence in
Tele-mental Health Service Delivery
- **Laura K. M. Arcibal, MPA, State Telehealth and Health Care Access Coordinator**
Office of Planning, Policy, and Program Development, Department of Health
Telehealth: Quality Health Care Remotely
- **Kelley Withy, MD, PhD**
Professor, John A. Burns School of Medicine and Director, Hawai'i/Pacific Basin
Area Health Education Center (AHEC)
Hawaii UTELEHEALTH

Considerations for Promoting Client Engagement and Telepresence in Tele-mental Health Service Delivery

Matthew Milette-Winfree, PhD, Clinical Psychologist
University of Hawai'i's Center for Cognitive Behavioral Therapy

Considerations for promoting client engagement and telepresence in tele-mental health service delivery

Matt Milette-Winfrey, Ph.D., Olivia Conover, M.A., Dah Eun Suh, M.A., Spencer Choy, B.A., Brad Nakamura, Ph.D.
University of Hawai'i at Mānoa
June 29, 2020



Goals

- Expound on previous April conversation re: 'telepresence' best practices as adopted by UH Mānoa's Center for Cognitive Behavior Therapy, Child Division
- Time-permitting, discuss any specific questions/comments about tele-mental health service delivery posed by participants in the chat window

Background

Recommendations for increasing rapport and “telepresence” during telehealth

- Initiated due to COVID-19; however, recommendations apply broadly

Henry, Block, Ciesla, McGown, and Vozenilek (2017) - systematic review

- Broad to all health care providers
- Identified 6 major themes/categories
- Specific recommendations adapted from research literature and current practice, focused on child/adolescent services

6 Themes

from Henry et al. (2017)

1. **Pre-interactional**
2. **Verbal Communication**
3. **Non-verbal communication**
4. **Relational**
5. **Environmental**
6. **Educational**

1. Pre-interactive

1. Pre-interactional

- Includes your own attitudes, confidence, beliefs, competencies, and cultural awareness preceding service delivery.

...What do I think about telepractice broadly?

...Do I think telepractice can be effective?

...How confident am I in my ability to conduct telepractice?



1. Pre-interactional

Recommendation #1: Aim to achieve a positive viewpoint re: telepractice and be mindful of your own biases.

- Reflect on how the benefits of telepractice can outweigh drawbacks.
- Reflect on your own biases and discomfort with telepractice or technologies.
- Consult with administrators/supervisors on these issues as needed prior to delivering counseling services.

2. Verbal Communication

2. Verbal Communication

- Research suggests in telepractice sessions there tends to be less small talk and praise, which can damage rapport/alliance.
- Technical language and jargon can make this problem worse.

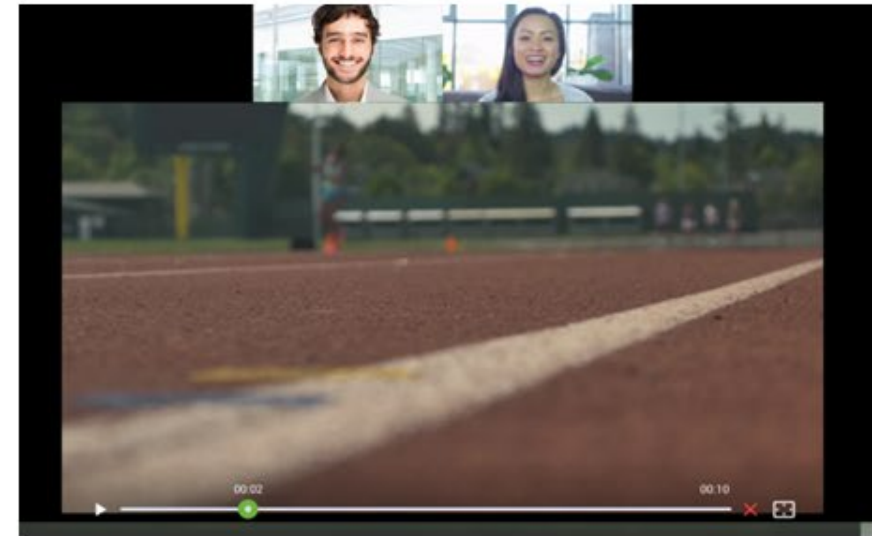
...What are some verbal communication strategies I normally employ?

...How can I adapt these to telepractice counseling sessions effectively?

2. Verbal Communication

Recommendation #2: Continue with check-ins and “leave ‘em laughing” strategies at the end of session.

- Ask youth to teach you something about the technology
- Student share screen to show you a document, drawing, video, website, etc.



2. Verbal Communication

Recommendation #2: (cont.)

- www.kahoot.com; <https://jeopardylabs.com>, or <https://skribbl.io>
- Use word generators for games like charades, pictionary, "snowman," etc.
- Have youth screen-share a game they are playing, or take turns doing so
- Adapt other activities - read online jokes to each other, "would you rather questions," etc.

2. Verbal Communication

Recommendation #3: Maintain the same level (or even more) of small talk/praise during the session.

- Be mindful of how often you are engaging in small talk/praise.
- Try to remind yourself, and increase the frequency.
- Take turns engaging in show and tell for items in student's background or in their home broadly (if comfortable).

2. Verbal Communication

Recommendation #4: Use simple and clear language; avoid jargon.



2. Verbal Communication

Final note: Consider the use of text/chat features for especially shy/anxious students.

3. Non-verbal Communication

3. Non-verbal Communication

Includes eye contact, empathetic gestures, voice quality, vocal tone, and visual cues

Recommendation #5: Maximize non-verbal patterns of communication.

- When full views are not possible, periodically use non-verbal signals (e.g., hand gestures)
- Combine verbal communication recommendations with appropriate utilization of visual, non-verbal cues



3. Non-verbal Communication

Recommendation #5: (cont.)

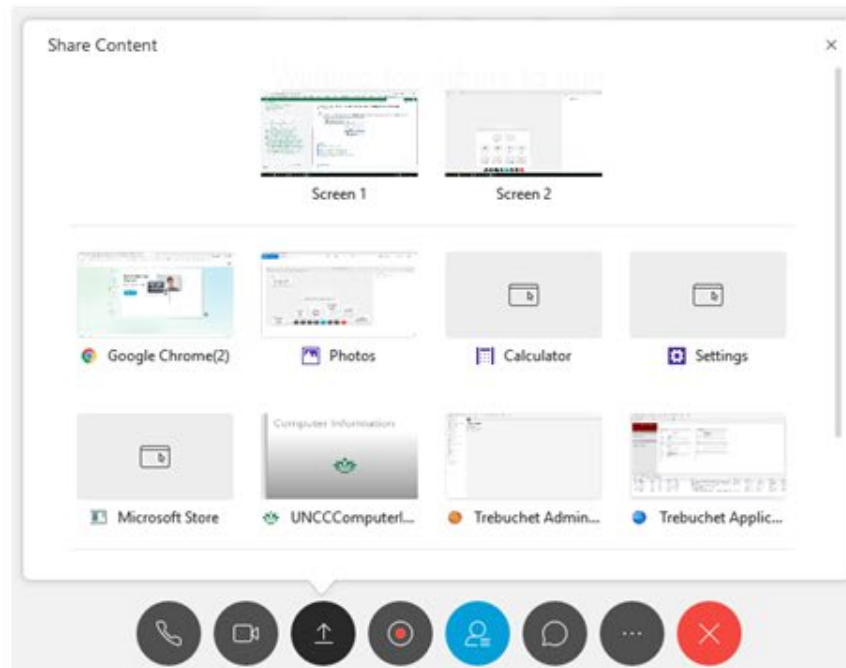
- Examples 1 - Using puppets/action figures to get children's attention & to tell a story



3. Non-verbal Communication

Recommendation #5: (cont.)

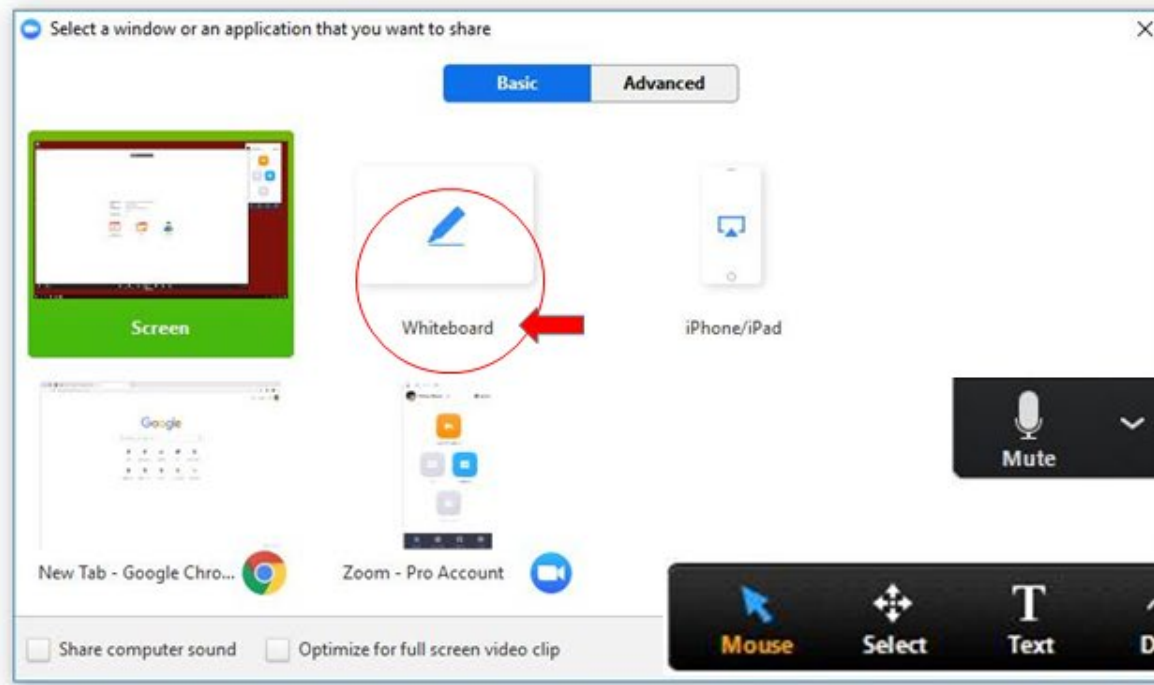
- Examples 2 - Screen sharing relevant images (e.g, progress graph), files, or websites (e.g, youtube, Kahoot) that facilitate therapeutic service delivery



3. Non-verbal Communication

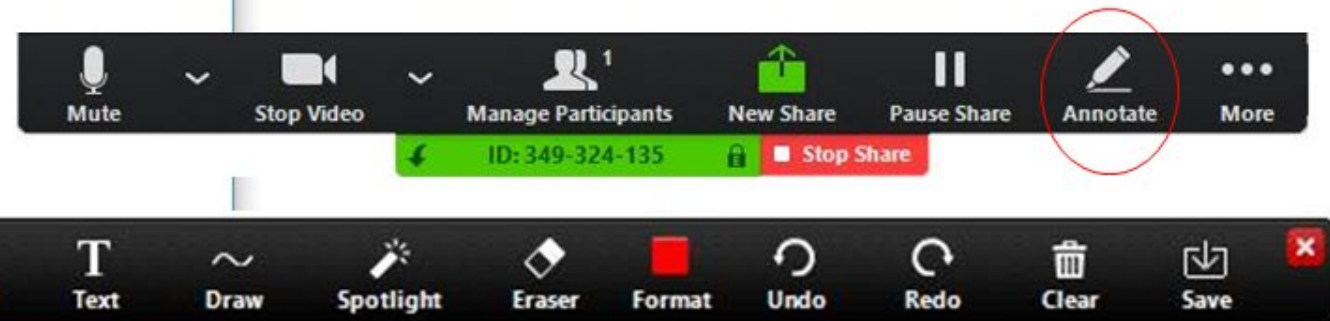
Recommendation #5: (cont.)

- Using whiteboard features to create pictures, documents, and games together



On both Zoom and Webex

- Counselors can grant the client the ability to annotate
- Students can then draw, color, or type on the whiteboard



3. Non-verbal Communication

Note: using video-based applications may interfere with internet connectivity when using Webex or Zoom.

- consider letting the youth play the video from their end
- Try to download the media before the sessions

3. Non-verbal Communication

Recommendation #6: Be aware of equipment quality and placement.

- Situate cameras with full views of each other to allow as much non-verbal communication as possible
- Firmly situate the cameras to avoid youth playing with the camera



4. Relational

4. Relational

Includes rapport and relationship building

Recommendation #7: express caring and active listening skills & show strong collaborative stance

- Using active listening skills such as attending, reflection, clarification, and summarizing
- Acknowledging challenges faced due to COVID-19 and utilizing active listening skills to establish and maintain therapeutic alliance
- After ascertaining current needs, establish relevant treatment goals

5. Environmental

5. Environmental

Includes physical surroundings and privacy

Recommendation #8: assure the patient that privacy and confidentiality extend beyond the transmission of data

- Make it clear that you are not using a shared space (no one is around you)
- Use headphones



5. Environmental

Recommendation #8: (cont.)

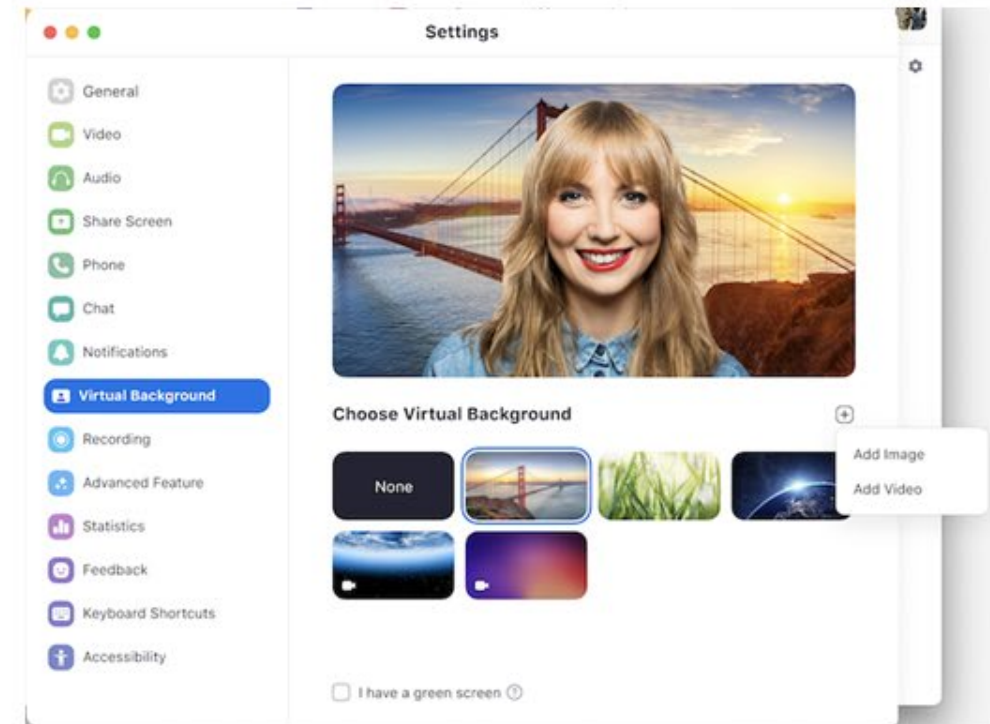
- Ask the parents to arrange a private and confidential space for the child
- Some things to consider
 - Does the student have a sibling that might eavesdrop?
 - Does everyone in the student's family know that the student is receiving therapy services?
- Suggestions
 - Hanging a "Do not Disturb" Sign
 - Playing music outside the youth's door



5. Environmental

Recommendation #8: (cont.)

- Be mindful of being “inside” the families’ homes
- Consider asking them what their “house rules” are beforehand to respect them
- May utilize the custom virtual background option (available in zoom & webex) if the youth does not want to show their homes



5. Environmental

Recommendation #9: create a calming or reassuring background

- Adjust the lighting, background, and clothing to communicate warmth and professionalism

...How do I look on the video screen?

...Does my background look professional and comforting?

5. Environmental

Recommendation #10: keep your environment/background as distraction-free as possible



5. Environmental

Recommendation #11:

work collaboratively with families to help manage their home environment, both for the purposes of telehealth and more broadly



6. Educational (ongoing learning)

6. Educational (ongoing learning)

Continuing development+evaluation of interpersonal skills in telepractice.

Recommendation #11: Collect and review quick but routine data at the beginning of each telepractice counseling session and discuss with student/family.



6. Educational (ongoing learning)

Recommendation #11 (cont.)

- Youth and/or parent reported treatment satisfaction rating
 - 0 (Not at all Satisfied) to 4 (Very Satisfied)
- Session Rating Scale (Scott D. Miller) - for older students, parents
 - Relationship: "I did not feel heard, understood, and respected..."
 - Goals and Topics: "We worked on and talked about what I wanted to..."
- Child Session Rating Scale (Scott D. Miller)
 - Listening: "[therapist name] did not always listen to me..."
 - What We Did: "I liked what we did today"

6. Educational (ongoing learning)

Recommendation #12: This area of study and clinical development warrants future investment.

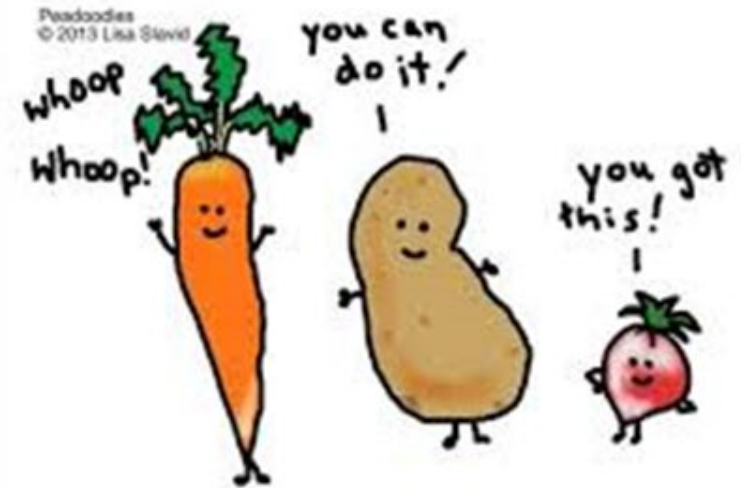
Mahalo!

Local resources:

<http://helpyourkeiki.com/whats-new-2/>

Follow-up questions:

mwinfree@hawaii.edu



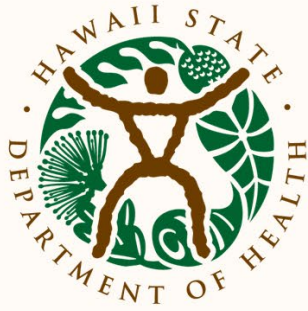
totally rooting for you

Quality Health Care Remotely Telehealth

Laura K. M. Arcibal, MPA

State Telehealth and Health Care Access Coordinator

Office of Planning, Policy, and Program Development,
Hawai'i Department of Health



Quality Health Care Remotely

Telehealth

Laura K.M. Arcibal, M.P.A
State Telehealth and
Health Care Access
Coordinator

H i g h l i g h t s

01 Why is it important

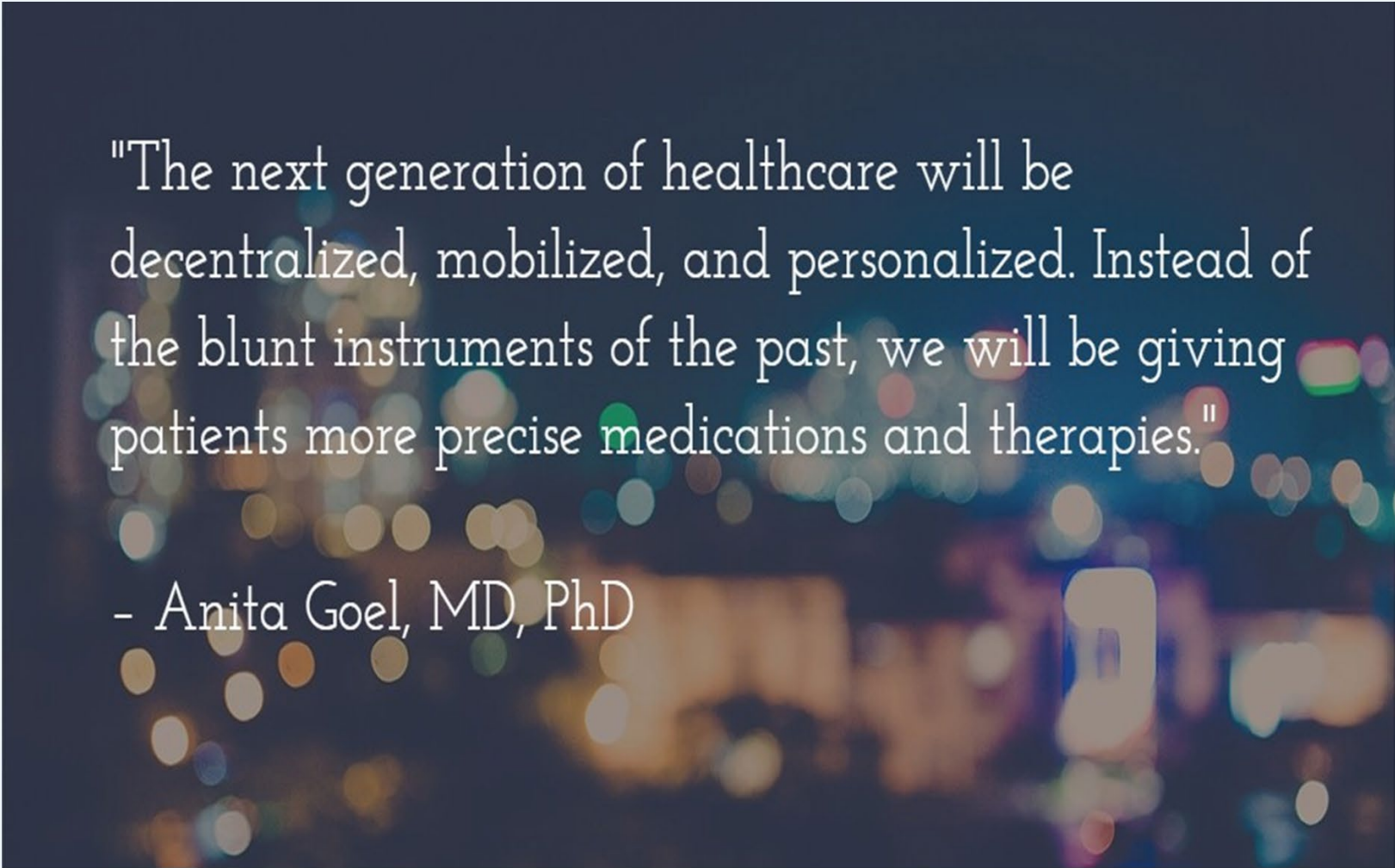
2. Main advantages

3. Response Efforts 04

Local Case Study

05 A Glimpse Forward

H a w a i i T e l e h e a l t h



"The next generation of healthcare will be decentralized, mobilized, and personalized. Instead of the blunt instruments of the past, we will be giving patients more precise medications and therapies."

- Anita Goel, MD, PhD

01

Importance

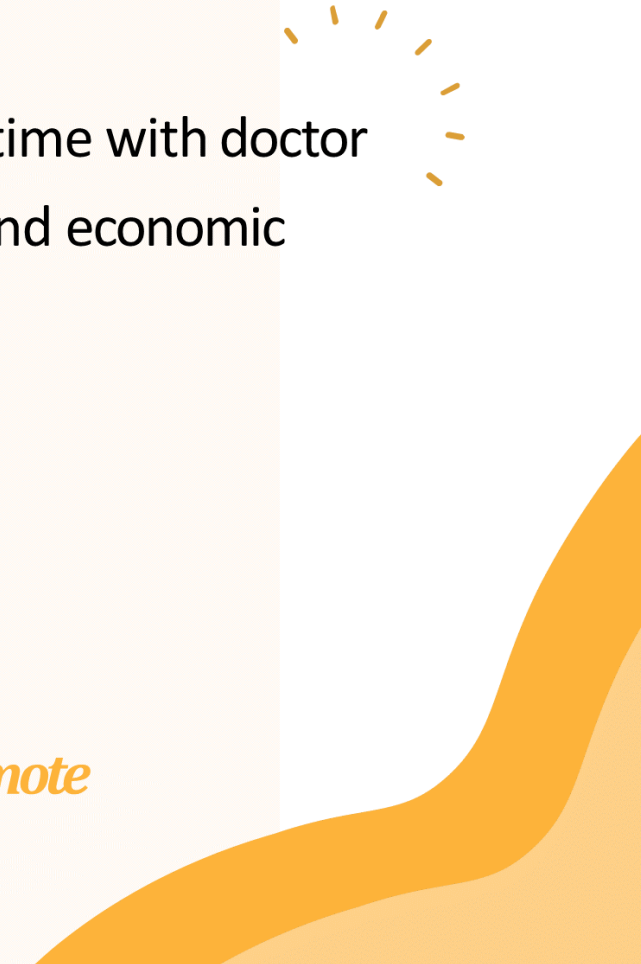
Today

Greatest health care access challenge of our lifetime with doctor shortages, job losses, food insecurity, poverty, and economic divergence.

Tomorrow

Brings hope in the way of change.

#Telemedicine #QualityCare #WeDoRemote



02

Main Advantages of Telehealth

Remote Access



Health



Innovative



Timely Alerts



Engagement



Visual



Decision-making

03

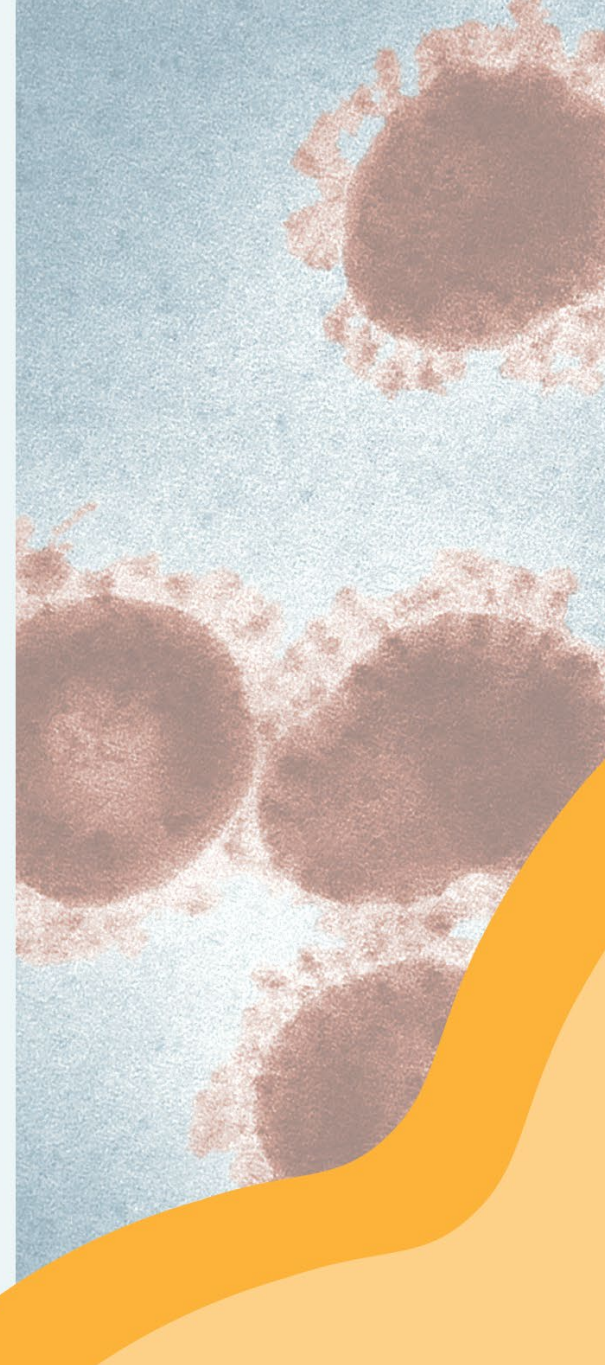
Response Efforts

Partnerships with U.H. Area Health Education Center and Pacific Basin Telehealth Resource Center

Through the establishment of the Hawaii UTelehealth and Telehealth Hui ---Major Solutions For Accelerating Telehealth in Hawaii's Community



All-Access

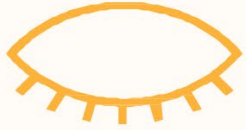


04

Behavioral Health: Case Study

Hamakua-Kohala Health Center (Hawaii Island)

- Rural community access to surrounding Waimea, Kohala, and Hawi Areas
- 100% Fully Transitioned BH Workforce
- Less than 5% "No Show" rate
- Tech-integrated, blended workforce
- iPads
 - FaceTime ~65% (majority of patients use iPhones)
 - Doxy.Me ~ 25%
 - Audio Only ~ 10% (no internet, no smartphone, and limited data plan)



...a glimpse forward

- Streamlined, integrated telehealth platforms
- Convenient health care access remotely
- 24/7 Blended Workforce (Untethered from "Old" 9 to 5 Shift Work)
- Outcomes-Oriented, Focused, and Personalized Healthcare

Mahalo

H a w a i i T e l e h e a l t h : Q u a l i t y H e a l t h C a r e R e m o t e l y

HAWAII UTELEHEALTH

Kelley Withy, MD, PhD

Professor, John A. Burns School of Medicine and
Director, Hawai'i/Pacific Basin Area Health Education Center (AHEC)



HAWAII UTELEHEALTH

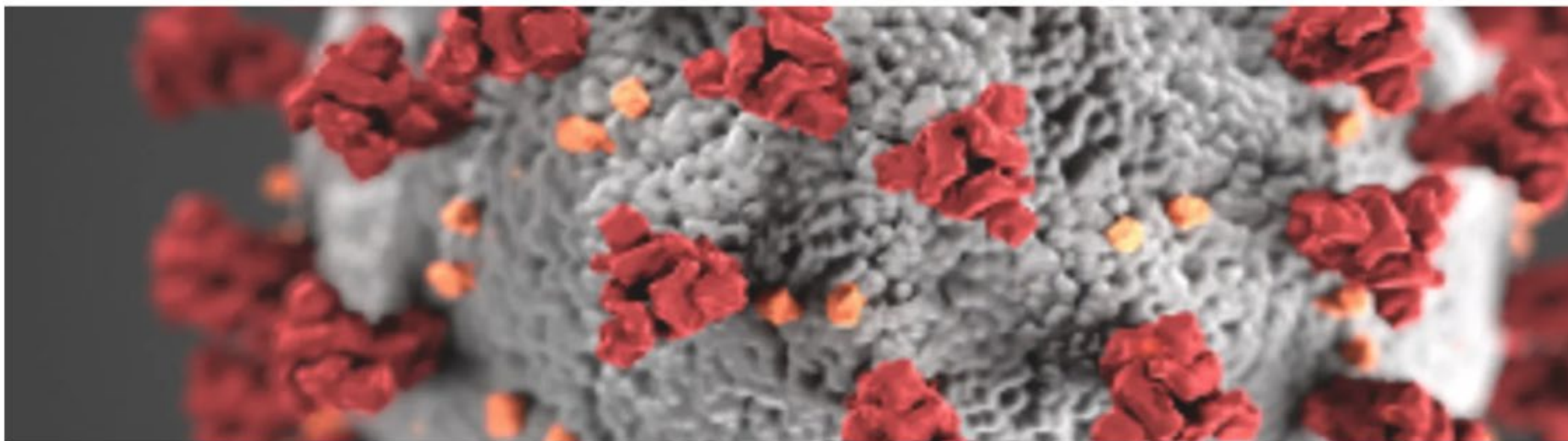
<https://mentalhealthhawaii.info/>

<https://covidhawaii.info/>

VisuWell (Telehealth) and Virtriage (for on demand)



HAWAI'I UTELEHEALTH



COVID-19 ONLINE VIRUS SCREENING

[CLICK HERE](#)

*If you require an interpreter, please call our office at 808-692-1060 at

Behavioral Health and Homelessness Statewide Unified Response Group (BHHSURG)

COVID-19 UPDATE

Emergency Symptoms

IMPORTANT

IF YOU ARE EXPERIENCING A LIFE-THREATENING CONDITION, PLEASE CALL 911 IMMEDIATELY.

Blue colored lips or face
Confusion, altered or slurred speech, difficulty waking up
Difficulty catching your breath or very hard time breathing or gasping for air
Extreme light headed or dizziness such that you are afraid to stand up
New seizures or seizures that won't stop
Severe chest pain or pressure (excluding pain from coughing)
Symptoms getting worse or symptoms went away and came back worse
Unable to keep down food or drink for the last 12 hours

If possible, please call your hospital and let them know you are coming and that you have symptoms of COVID-19.

If you have a mask, please wear it to minimize infecting others.

By selecting 'Next Question' below you agree you are not having a life-threatening emergency.

Next Question

Do you have any of these symptoms? (Check all that apply, if none just click "Next")

- ☐ Fever
- ☐ Cough (new or worsening)
- ☐ Shortness of breath/Difficulty breathing (new or worsening)
- ☐ Body aches
- ☐ Diarrhea
- ☐ Fatigue (new tiredness doing normal activities)
- ☐ Headache
- ☐ Red eyes

You have some symptoms that could indicate COVID-19

We recommend you call your primary care provider to discuss your symptoms and monitor them closely.

If you cannot reach your healthcare provider, you can call or click on the links below. Or you can use a new service called Hawai'i UTelehealth by clicking "Next Question" at the bottom of this page. This service will connect you with a provider between 8am and 6pm, seven days a week and the first visit is FREE.

HMSA: <https://hmsa.com/well-being/online-care/>

Kaiser: <https://healthy.kaiserpermanente.org/hawaii/get-care>

Queens: 808-691-2619

Hawaii Pacific Health: <https://www.hawaiipacifichealth.org/hph-covid-19-updates/>

University Health Partners: <https://uhphawaii.org/index.php/telemedicine/>

HMAA: <https://www.hmaa.com/telemedicine/>

UHA: <https://uhahealth.com/page/telehealth>

NEW SERVICE: Hawai'i UTelehealth provides telehealth between 8am and 6pm seven days a week for FREE (first visit free, following visits free or reduced cost). Just click "Next Question" below, or sign up for a healthcare or mental health visit here: [Click here](#)

Next Question

Behavioral Health Symptoms

Are you feeling anxious and would like to talk to a behavioral health specialist about worries, stress, anxiety, substance use or other concerns?

If so, please visit our Telepsychiatry Interview

[Click Here](#)

<https://www.ahec.hawaii.edu/>

[Reset Interview](#)

MENTALHEALTHHAWAII.INFO





IF YOU WOULD LIKE AN ONLINE TELEPSYCH VISIT NOW
(BETWEEN 8AM-6PM MONDAY THROUGH FRIDAY):

[CLICK HERE](#)

SCHEDULE AN APPOINTMENT WITH A MENTAL HEALTH PROVIDER
VIA TELEHEALTH (VIDEO AND AUDIO):

[CLICK HERE](#)

VISUWELL NEW PATIENT PRE-APPOINTMENT CHECKLIST:

[CLICK HERE](#)

Hawaii Telepsych Visits

Aloha, Hawai'i Department of Health and University of Hawai'i JABSOM are working together to provide Hawai'i residents with online telepsychiatry and telepsychology.

Would you like to talk to a behavioral health specialist using telehealth about worries, stress, anxiety, substance use or other concerns? We offer the following providers. First visit and maybe more are free:


Psychiatrist
Psychologist
Clinical Social Worker
Certified Substance Abuse Counsellor
Treatment of drug use and chemical dependency
Psychiatric Advanced Practice Nurse Practitioners
Licensed Mental Health Counselor
Buprenorphine Provider

For explanation of types of mental health providers: <https://www.nami.org/learn-more/treatment/types-of-mental-health-professionals>

If using a Mac or PC, please use Chrome or Firefox as your browser.

For iPhone and iPad devices, please use Safari. For Android users, please use your native Chrome browser.

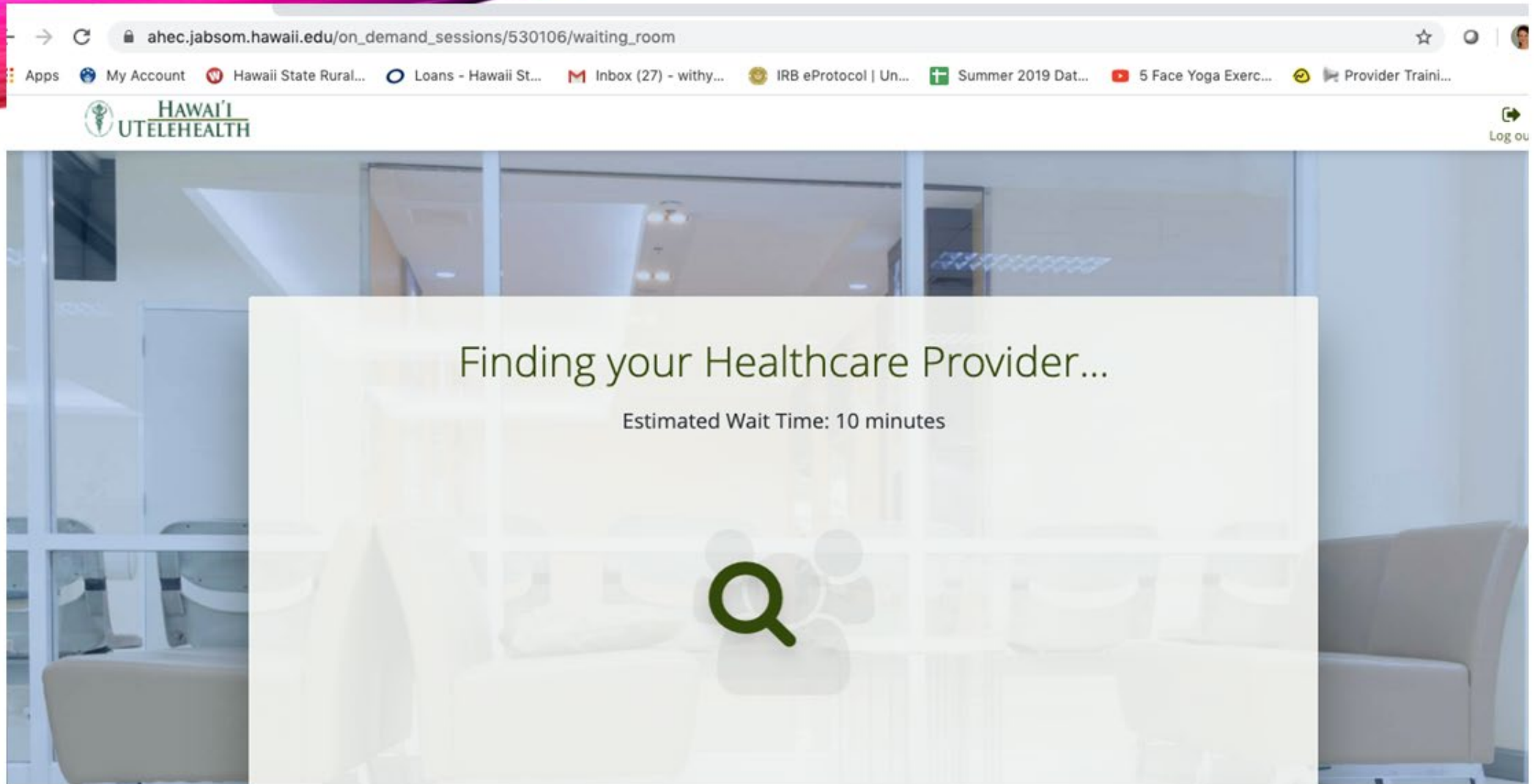
We are working to provide interpreter services. If you should require an interpreter, please call 808-692-1060 four days in advance to coordinate the appropriate interpreter to assist you.

 [Start Interview](#)

Find the Provider Right for You

Select State ▼

BEGIN SEARCH



visuwell
See Healthcare Differently

Directory

Support Center

Notifications1

Home

Settings

Log out

Mute Video

Mute Speaker

Mute Mic



Fullscreen

Layout

Share Screen

Invite Attendees

Advanced Settings



10 things you can do to manage your COVID-19 symptoms at home

If you have possible or confirmed COVID-19:

1. Stay home from work and school. And stay away from other public places. If you must go out, avoid using any kind of public transportation, ridesharing, or taxis.

2. Monitor your symptoms carefully. If your symptoms get worse, call your healthcare provider immediately.

3. Get rest and stay hydrated.

6. Cover your cough and sneeze.

Chat

A new room has been created

Transient User Guest User has entered the room

Message



PROVIDERS

- 24 paid, 2 volunteer Mental Health Providers
 - 8 Psychiatrists
 - 6 Psychologists
 - 5 LCSW
 - 3 Psychiatric APRN
 - 4 LMHC/CSAC
- 651.5 hours of service
- At least 474 patients seen



CHANGE IN SCORES

- How comfortable are you using telehealth modalities?
 - 67% to 74% increase in “Very comfortable”
- How useful is telehealth to patient care?
 - 61% to 75% increase in “Very useful”
- How likely is it that you will recommend Telehealth/Telemedicine to colleagues/friends & family after using Hawaii UTelehealth? 91%
- “I think this is the future.”
- “My patients all prefer texting rather than face-to-face conversation. Texting also is an excellent way of documenting questions and answers.”
- “Needs to be simple for patients to access.”



FUTURE

- 14 providers
- Continue on limited schedule
- Collaborate with DOH and others to care for homeless, students, prisoners, rural, substance use disorder, family support
- Training in telehealth for provides and students



@ B H H S U R G

#HealthyWeLiveHawaii **#SocialDistancing**
#FlattenTheCurve **#TogetherWeCan**

BHHSURG.HAWAII.GOV